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DECLARATIO			Ralph W. MacKenzie							
UTILITY OR D PATENT APPLIC	First Named Inventor Ralph W. MacKenzie COMPLETE IF KNOWN									
PATENT APPLIC	Application No.									
N p	Declaration	Filing Date								
Declaration submitted with or	submitted after	Group Art Unit	t							
	initial filing	Examiner Name								
As a below named inventor, I hereby declare that:										
My residence, post office address, and citizenship are as stated below next to my name.										
My residence, post office add	ress, and citizenship	are as stated below	next to my	name.						
The line I are the emissional fire	et and colo introduct	(anly if one name is	s listed belo	w) or an original, first and joint						
inventor (if plure) pames are	st and sole inventor i	whier matter which	h is claimed	and for which a patent is sought						
on the invention entitled:	iistea teiew, ei aie e									
METHOD AND	APPARATUS FOR A	SSEMBLING A CLOS	URE TAB TO	D V LTD						
		tle of the Invention)		<u>-</u>						
the specification of which	1	,								
is attached hereto										
or										
was filed on, as United States Application Number or PCT International Application										
Number: and was amended on (if applicable).										
Thereby state that I have veri	arred and understant	the contents of the	a above ide	ntified specification, including the						
claims, as amended by any at				miled specification, merading die						
ciantis, as amended by mily th	mondimone specialism	y rotottod to doo.	•							
I acknowledge the duty to dis	sclose information w	hich is material to p	patentability	as defined in Title 37, Code of						
Federal Regulations § 1.56.			_	<u>_</u>						
			-							
I hereby claim foreign priorit	y benefits under Titl	e 35, United States	Code §119	(a)-(d) of any foreign						
application(s) for patent or in	ventor's certificate,	or § 365(a) of any l	PCT interna	itional application which						
designated at least one count	ry other than the Uni	ited States of Amen	ica, listed b	elow and have also identified						
below, by checking the box, international application hav	any toreign applicati	ion for patent of inv	entor s con	nneate, or or any FC1						
Prior Foreign Application Number(s)	Country	Foreign Filing Date	Priorit	0 10 10 40 1 1						
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Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:										
I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.										
Application Number (s)	Filing Date (MM/DD/YY)	Additional provisional application							
		numbers are listed on a supplemental								
60/319,560			priority data sheet PTO/SB/02B							
60/319,655	10	0/29/02	attached hereto.							

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DECLARATION - Utility Or Design Patent Application 1 hereby claim the benefit under Title 35. United States Code § 120 of any United States application(s) of any PCT international application designating the United States of America, listed below and, insofer as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the matter provided by the first paragraph of Title 35, United States Code § 112, 1 acknowledge the daty to disclose information which is material to putentiability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filling date of the prior application and the patiental or PCT international filing date of this application.												
U.S Parent Applic			Parent	Parent Filing Date			Date	Parent Patent Number				
Number		Number			(MM/DD/YYYY)							
Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.												
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Parel Trademark Office connected therewith: Or Registered practitioner(s) name/registration number listed below Place Customer Number Bar Code Label Here							Patent er ode					
Name			Registration No.			Name		Registration No.				
John E. McGarry			,360		Mark A. Davis			37,118 42,228				
H. Lawrence Smith		,			Thomas Williams			50.859				
Joel E. Bair 33,356 Michael F. Kelly 50,859												
Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.												
Direct all correspondence to Customer Number or Bar Code Label				20915 or Correspondence Address b					ss be	low		
Name		A. Davis, Reg. No. 37,118 ARRY BAIR PC										
Address	171 Mo	nroe Avenue	, NW, \$11i	te 60	00							
City, State, Zip	Grand I	Rapids, Michi	gan 49503	3				_				
Country	US	Te	elephone		616-7	42-3500	Fax		616-742-10			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any potent issued thereon.												
Name of Sole or First Inventor A petition has been filed for this unsigned inventor.												
Given Name (first and middle [if any]) Family Name or Surname												
Ralph William MacKenzie												
Inventor's Signature Kaleh William			7	Mac Kussis			Dated 9/18/07					
Residence: City Oke		emoŝ	State	МІ	7	Country	US		Citizenship		US	
Post Office Address	111	7 Windreef Ci	rcle									
City Okemos			State	M	11	Zip	48864		Country	US		
Additional inventors are being named on the one supplemental additional inventor(s) sheet(s) PTO/SB/02A attached hereto.												

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	Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Name of Inventor A position has been filed for this unsigned inventor										
	Given Name (first and middle [if any])				Family Name or Surname						
Tyler James DeLong											
Inv	ventor's Signature	July la	no Deta	/ 1D				Dated 9/17/03			
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Name of Inventor											
	Given Name (first and middle [if any])				Family Name or Surname						
Ry	Ryan P. Gingras										
In	ventor's Signature	r's Signature Bran P. Shuros Dated 9-16-03									
Re	esidence: City	Grass Lake	State	MJ	Country	US		Citizenship		US	
Po	st Office Address	12371 Bohne Rd.									
Ci	ity	Grass Lake	State	MI	Zip	49240		Country	US		